



OFFICE OF DRUG CONTROL POLICY

KENTUCKY JUSTICE AND PUBLIC SAFETY CABINET

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GRASS ROOTS DRUG CONTROL ACROSS KENTUCKY



As I travel across the state, I hear one common theme: Our community has had enough. We are not going to take it anymore. Decades of painful experience involving drugs have taught us there is no single route to success. The way to make lasting progress against drug abuse is with a balanced strategy of community drug prevention, education, treatment and law enforcement.

In October, the Leadership Elizabethtown Chamber of Commerce held a meth madness day, "Don't Meth with Us: What Every Community Must Know." About 350 citizens gathered in the community center to hear from state officials, recovering drug addicts and Kentucky State Police Public Affairs Officer, Steve Pavey. The speakers shared meth statistics, graphic photos, real life stories and solutions to move Hardin County out of the "top ten list" of meth cases in Kentucky.

Just two weeks prior, 13 police officers from six states graduated from DARE officer training. Each officer works with children to raise their self-esteem, teach them how to make decisions on their own and help them identify positive alternatives to drugs. Sgt. Phil Crumpton, state DARE Coordinator with the Kentucky State Police, was instrumental in creating these positive role models who go back to their respective communities and provide knowledge about drug abuse, the consequences of drugs and skills for resisting peer pressure to experiment with drugs, alcohol and tobacco.

Recently, I spoke about the Office of Drug Control Policy and its initiatives to about 40 women in Fariston, Kentucky. A key drug assessment summit volunteer and treatment professional, Betty Mueller, was very excited to hear about our efforts in jail treatment, drug courts, drug task forces and Recovery Kentucky.

Also in October, ODCP held a joint conference between KY-ASAP and Champions for a Drug-Free Kentucky. Awards were presented to six communities and individuals by Mary Ann Solberg, Deputy Director of the Office of National Drug Control Policy. Governor Ernie Fletcher also praised the nearly 75 grassroots coordinating boards and empowerment groups for answering the call.

At a Jefferson County drug court graduation I attended, I learned how powerful the method of teaching a new lifestyle really is. We have learned it is not possible to sustain progress without treating the addicted. By encouraging addicts to stay drug-free, drug courts provide a valuable alternative to incarceration, while lowering rates of addiction.

The end of October brought encouraging news from the Pennyrile Drug Task Force Director, Cheyenne Albro. Albro announced scores of cases related to the passage of Senate Bill 63 and the monitoring of the pharmacy logbooks and Lt. Governor Steve Pence announced a 75% drop in meth cases in Kentucky. These are just a couple of ways Kentucky is making progress, but ODCP will continue to analyze the trends so we can stay ahead.

So whether we are speaking to the Pulaski Retired Teachers Association, the managers and administrators in northern Kentucky, reviewing the Clinton County "Think – Don't Drink" campaign with Paula Little or serving on a substance abuse and mine safety task force, we need local communities to help fight the drug problem. Elected officials, grass-roots organizers, faith leaders, parents, teachers and young people need to tackle this problem and help deliver change. Communities must insist their neighborhoods are drug free.

Keep up the amazing work Kentucky. While we have certainly not solved the drug problem, we have taken a significant step forward.

THIS ISSUE

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ODCP AWARDS NEARLY 6 MILLION DOLLARS TO FIGHT DRUGS IN KENTUCKY

The Office of Drug Control Policy began its grant awards tour throughout the Commonwealth in early July by awarding nearly six million dollars for drug task forces, Champions coalitions, jail treatment programs, drug courts and Operation UNITE.

The tour began in Muhlenberg County with stops in London, Pike County, Bowling Green, Elizabethtown, Owensboro, Henderson County, Boyd County and Boone County. Lt. Governor Steve Pence joined ODCP throughout the tour in awarding the grant money.

During the 2005 general session of the Kentucky General Assembly, the legislature passed the first budget of the ODCP, allowing the agency to move forward with many of its initiatives.

Jail Treatment Programs

The ODCP awarded grants of \$30,000 to \$69,000 to nine local jails for substance abuse treatment programs. Six of the grants were presented for jails to pilot new substance abuse programs and three local jails received grants to enhance their existing programs.

Mason, Marion, Three Forks (Owsley, Lee and Wolfe), Kenton, Hopkins and Grayson are starting new jail programs. Christian, Hardin and Daviess Counties will continue their program with funds received by ODCP.

Operation UNITE

UNITE received \$1.5 million in coal severance funds and divided it equally between Clay and Pike Counties for construction of a treatment facility in Manchester and operation of an existing treatment center in Pikeville.

Operation UNITE is a multifaceted, comprehensive approach to combating the drug problem in eastern and southern Kentucky. U.S. Representative Hal Rogers also secured \$1.5 million in the federal budget for these treatment facilities.

"Getting dealers off the street is a critical component of our efforts, but true success will only come by putting broken lives and families back together," said Lt. Governor Steve Pence. "We have a significant shortage of drug treatment facilities across the state. The money for these two drug treatment centers is absolutely essential to getting people the help they need."

"Drugs are a statewide problem; it doesn't stop at city and county lines," said Office of Drug Control Policy Executive Director Teresa Barton. "We need to continue to work together to get rid of this problem which is ruining the lives of so many people in our state."



Warren County Regional Drug Task Force Officials receive grant money from ODCP and Lt. Governor Pence.

"In the past year UNITE has made tremendous progress in confronting the drug problem," said Barton. "Over 2,200 criminal cases have been opened, more than \$4.5 million worth of drugs have been taken off the streets and over \$250,000 in cash has been seized from dealers, all of which will be returned to communities."

Drug Task Forces

ODCP awarded over \$469,000 to twelve drug task forces across the state. Pennyriple Narcotics, South Central Kentucky, Greater Hardin Narcotics, Bullitt County, Bowling Green/Warren County, Barren County Community, Lake Cumberland Area, Northern Kentucky, Buffalo Trace/Gateway, FADE, Louisville Metro and Street Sales Enforcement received funds. ODCP was able to provide funds which will help restore a portion of the federal dollars the task forces have lost due to a decrease in Byrne/JAG grants funding.

"The organizations being funded have proven track records of success," said ODCP Compliance Branch Manager Van Ingram. "We hope these dollars will assist the drug task forces in fulfilling their commitment to their communities."

Drug Courts

ODCP provided \$2 million to establish drug courts in 14 coal-producing counties in seven circuits. The money came from coal severance tax and from the state's General Fund.

Hopkins, Crittenden/Union/Webster, Boyd, Carter/Elliott, Butler/Hancock/Ohio/Edmonson, McLean/Muhlenberg and Henderson received funding for adult drug courts.

Drug courts divert some non-violent drug offenders from the prison system into treatment and are established by judicial circuits rather than by county.

"We need to invest resources in helping prisoners prepare to reenter society, provide job training and treatment for substance abuse, for example," said Barton. "By doing this we will make our communities safer by reducing the chance that ex-prisoners will return to a life of crime."

"The idea that we can incarcerate our way out of the substance abuse problem must be laid to rest," said Lieutenant Governor Pence. "Governor Fletcher and I realize we must end the revolving door cycle in our state. We are releasing offenders from prison, only to have them go back out and re-offend because they are still drug addicts. The plan to focus on treatment, prevention, law enforcement and education is long overdue."

Champions

Champions Coalitions for a Drug-Free Kentucky received funding on the ODCP tour as well. Nearly \$750,000 was distributed for 56 Champions Coalitions among 62 counties.

Champions for a Drug-Free Kentucky "promotes the prevention of the abuse of alcohol, tobacco and other drugs, and the reduction of violence in Kentucky communities." Champions Coalitions are



The Muhlenberg County Champions Coalition received grant money during the ODCP Grant Awards Tour.

volunteer-driven. They implement prevention curriculum in their community's schools and environmental strategies in the community.

"Getting drugs out of our communities is one of the top priorities of Governor Fletcher's administration. Kentucky is not going to incarcerate its way out of the drug problem," said Lieutenant Governor Pence. "It will take a balance of prevention, treatment, education and enforcement programs."

ODCP ANNOUNCES STUDENT DRUG TESTING SUMMIT

The ODCP formed a Student Drug Testing Advisory Council based on a recommendation from the Governor's 51-member Statewide Drug Control Assessment Summit. The Council is comprised of experts and community stakeholders from across Kentucky who have an interest in exploring student drug testing. The summit, which received input about student drug testing during public meetings held across the state, recommended the ODCP consider expanding drug testing in Kentucky schools.

After several meetings, the ODCP has decided it is time to bring people from across the Commonwealth together for a Student Drug Testing Summit.

The Student Drug Testing Summit will be held at The Brown Hotel in Louisville, Kentucky on February 28, 2006. The Summit will be co-hosted by Kentucky's Office of Drug Control Policy and the Office of National Drug Control Policy. ONDCP Deputy Director Mary Ann Solberg will be the keynote speaker. Drug-Free Schools Coalition Executive Director David Evans will be speaking at the Summit along with Principal Chris Steffner, Hackettstown High

School, New Jersey, who is one of the first principals in the nation to implement student drug testing.

The Summit will help determine the legal issues, policies, implications and funding for drug testing in schools. It will also provide opportunities for school system administrators, counselors, teachers, concerned parents and others to learn about the benefits of student drug testing from school systems that have experienced a decline in drug use since implementing student drug testing.

For more information on the Summit, please contact:

Debbie Spaulding
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Debbie.Spaulding@ky.gov.

A block of rooms at the Brown Hotel have been reserved. Please contact the hotel directly at 888-888-5252 to reserve a room and ask for the Student Drug Testing Summit rate.

TEACHERS LEARN TO SPOT METH

Teachers throughout the Muhlenberg County school district will soon know what methamphetamine smells like, first-hand, as they undergo training on how to spot meth-affected kids. They'll know if a student has a combination of hyperactivity and tiredness, stomach aches and watery eyes, depression, problems remembering and paying attention, he or she could be a meth-affected child. And they'll know how to report their suspicions to the district's tip line, police or social services.

"As a first-line defense for children exposed to methamphetamine use or production in their homes, educators need to have their eyes open for the signs that point to a meth-affected child," said Gail Johnson, Community Educator for the school district.

"I can't think of any other place that sees practically every child in the county," Johnson said. "We have to step up and meet this need."

"Children who are suffering from methamphetamine use in the home will often cause problems in the classroom," says Holly Hopper, Coordinator of the University of Kentucky's statewide Drug Endangered Children's Coalition. "They're not all easy to love, they've had horrible conditions in many cases."

"These children are looking for stability," said Venita Ray, Family Resources Director for Bremen Elementary School. "Most of these children enjoy school. When they go home at night, they don't know if they're going to be fed, who's going to be in their homes."

"Educators say right now, they're not sure what to look for and could be missing the signs. Simple sleepiness by itself, or just watery eyes, or only a stomach ache, doesn't point to meth exposure, say the experts. But when you start putting these things in combination, the more you have, the more of a possibility (meth exposure) is what you're dealing with," said Cheyenne Albro, Director of the Pennyrile Narcotics Task Force. Albro will be training every Muhlenberg County teacher.

"The key to our meth problem will be education," Albro said. "The children, our main victims and silent victims, have become a high priority."

"Sometimes just a little understanding can make life in the classroom a little easier," Hopper said. "When a child's experience with you every single time is positive, which I know is a tall order, they're going to learn to trust you. Children need to learn to trust the world."

Research shows children in homes where meth is used are significantly more likely to be neglected and physically and sexually abused. That means that forming an attachment to parents, on which later social skills and feelings of security are based, could be thwarted.

"Meth users are also less able to form attachments to their children," said Dr. Betty Spivack, a Forensic Pediatrician with the State Medical Examiner's Office. She's studying the effects of exposure to meth on children. Teachers may have to play the role of surrogate parent, instilling social skills that otherwise will fall by the wayside, leading to serious consequences later in life.

"Teachers need to make contact with their kids," Spivack said. "Foster the link. That may be the life preserver for a child that doesn't have anyone else that they can depend on."

"In the classroom, meth-affected children do have problems with recognizing and remembering what they see and hear," Spivack said. "They may have speech problems as well. Whether the learning problems can be reversed with special teaching or therapy is still up for debate, though it is becoming clear when children are removed from the home, they show marked improvement in behavior and health."

It's also known the earlier the intervention, the better children bounce back. That's why Hopper says teachers should report their suspicions, even if they're not sure.

"Don't be afraid to be wrong," Hopper said. "We're not insinuating everything is meth." She's not worried teachers will keep silent. From those who have received training, Hopper is hearing "thank you, thank you," she said. Many, once they hear a list of signs that point to meth exposure, realize they've had at least one child affected in their classroom. "It haunts them," Hopper said.

Debbie Vick, Guidance Counselor at Muhlenberg South High School, agreed. But she said it's not easy to report suspicions. "It is hard," she said. "You think of drugs, you think that somebody's going to come after me and my family. But teachers will call. I think after this training, there will be some that call the tip line if they think kids are in harm's way."

Courtesy: Messenger-Inquirer

NEW DRUG PREVENTION PROGRAMS TARGET EASTERN KENTUCKY SCHOOL DISTRICTS

A substance abuse grant has been awarded by the ODCP, Kentucky School Board Association and Kentucky Center for School Safety for eligible public elementary schools in eastern Kentucky. The program, "Too Good For Drugs," is a universal, school-based prevention program designed to reduce the intention to use alcohol, tobacco and illegal drugs.

"Many schools understand the need for substance abuse education," said KY-ASAP Branch Manager, Heather Wainscott of the ODCP. "Due to constraints on time and money as well as the ever present goal to reach high academic standards substance abuse prevention programs have not been implemented."

With this in mind, the partnership will provide seven drug prevention consultants to implement substance abuse prevention and education pilot programs in eastern Kentucky school districts which have the highest number of drug violations and self reported student drug use. Officials in Clay, Floyd, Harlan, Harlan Independant, Johnson, Knott, Perry, Pike, Whitley and Paintsville Independant applied for services offered through the pilot program.

Over 2,300 students at 48 elementary schools in these districts are eligible for the program. The drug prevention consultants will teach fifth-grade students skills and concepts which include the consequences of using drugs, the benefits of being drug-free, identifying and countering pro-drug pressures, resisting advertising appeals, and providing support to others on their decisions not to use drugs.

The consultants will employ the three components of successful substance abuse programs: prevention-education, treatment and enforcement. "The drug prevention consultants will work directly with students to offer life skills focused on developing the behavioral and social skills to protect against substance abuse," Wainscott said. "This includes refusal skills, anger management, conflict resolution, decision-making social skills and academic enrichment interventions."

The consultants will provide methods such as classroom-style presentations and one-on-one and support group interaction, she explained. The consultants will also offer professional development to raise faculty and staff awareness on the connection between prevention education and the student's academic success.

Drug abuse violations are on the rise in Kentucky schools. According to the 2004 Safe Schools Data report, drug abuse violations account for the largest number of disciplinary actions for Part I and II law violations in schools. At the September "Safe Schools — Successful Students" Conference, student drug use and school-based drug programs were key topics of conversation. "In order to start solving a problem you must acknowledge it first," said Jon Akers, Director of the Kentucky Center for School Safety. "Kentucky's drug situation is a problem that continues to get worse, especially in middle schools."

According to the 2004 Youth Behavior Risk Survey, Kentucky students use marijuana at about the same levels as their peers across the country. The same report shows Kentucky students using inhalants at rates much higher than students in other parts of the nation. Methamphetamine use is at about twice the level of students in other areas. Most schools use a variety of methods to inform students of the dangers of substance abuse. Drug prevention is discussed during health classes. Students Against Destructive Decisions (SADD) is an organization that encourages students to help other students make positive decisions.

School resource officers work with local law enforcement to conduct random locker searches. Forty-six Kentucky school districts currently conduct random drug tests for students involved in athletics and extracurricular activities, according to Akers. While student drug testing could be a valuable tool in identifying students to provide drug counseling and mental health services, it should not be used to identify students for disciplinary actions, Akers said. "When a child is using drugs, it's just a mask for another problem," he said. "As educators, it is our responsibility to provide a safe school environment and help students work through these problems in order to be successful in school and life."

For more information about the drug prevention pilot program in eastern Kentucky schools, contact Heather Wainscott at (502) 564-9564 or via e-mail Heather.Wainscott@ky.gov.

For more information about schoolbased drug programs, contact Jon Akers at (877) 805-4277 or via e-mail Jon.Akers@eku.edu.

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METH USE CITED IN INCREASE OF FOSTER CARE NEED

Hunter Elitzer's body is 5 years old. But his mind is trapped. He will always be an infant. He was beaten and kicked into a wall by his meth-addicted father when he was 3 months old. Hunter is blind now. He'll never talk or walk. But, he's smiling.

Hunter tips his head back to soak up the morning sun and listens with a baby grin to the crooning sound of Carol Elitzer's voice, touching his adoptive mother's face with pudgy fingers. "He's a good boy," Carol Elitzer says. "A happy baby. That's what he will be forever. This is the result of meth," she said. "This is what happens. This little boy has a life sentence."

Hunter is the fourth child Carol Elitzer and her husband, Sheldon, have adopted, but over the past 30 years, they have cared for more than 1,000 children as foster parents. More and more, the children brought to stay at the Elitzers', where they learn to tell the truth and how to swim, come from homes where drugs, especially methamphetamine, are as part of their daily lives as the air they breathe. The impact, Carol Elitzer says, is deep.

"Those children who have escaped physical abuse, and they are few, have almost always been neglected. Children from homes with methamphetamine learn to take care of themselves," she said. "You might have a 5-year-old who knows how to fry an egg. Their parents are too busy doing drugs to feed them right or clean them right. They believe drugs are a normal part of life. It's strange for them we don't get up in the morning and do drugs at the table and do them all day long."

The number of Kentucky children who need foster homes is slowly but steadily rising. Experts point to methamphetamine as a cause. Studies show children of meth users are more likely to be violently or sexually abused. Chronic neglect is widespread.

Physically, the children may show up sick, coughing, underweight. Some have sores or burns from exposure to meth. There's a lot of lice. Their livers and lungs may be damaged from breathing toxins. Emotionally, even the healthy children from meth homes are "drained," says Cherie Stiles, with the Green River Region Department for Community Based Services. "You can see it in their eyes," she said. "They just look haunted."

In one day, she placed ten children in foster homes. In nearly every child's home, there were drugs. "We're seeing more of it every day," Stiles said. "Nearly every child coming into care is affected by some form of substance abuse, methamphetamine especially."



Hunter was beaten and kicked into a wall by his meth-addicted father when he was 3 months old.

For children taken from homes where methamphetamine is being made, going to a foster home is extra scary. They can't take their clothes, can't take their teddy bear, can't take their blanky. "All of their belongings are toxic," said Mary Ellen Nold, Cabinet for Health and Family Services.

The first thing Carol Elitzer does when she gets a new child is show him where he'll be sleeping, to ease his mind. She doesn't try to hug. "Any kid that comes in here is scared," Elitzer said. "They don't trust anybody. They're distant. The first night is always hard, they may cry all night. Let them cry."

After a while in her home, Elitzer says, children start laughing more. They learn to play. They learn to be children. That is Elitzer's reward. "I love it," she said. "This is a hard job, but I love it."

There are never enough foster parents, though social workers say they're doing their best with what they have, providing new training for foster parents, taking care of the children of methamphetamine users and manufacturers while they're in jail or getting cleaned up or giving up. "We are seeing an increase in the number of children in foster care," Nold said. "With more meth, you need more homes."

Becoming a foster parent requires 30 hours of initial training, a family history, home inspections, references and background checks. "It's a constant, constant battle," to find a safe place for children to stay, Stiles said. In one month last year, the Green River Region DCBS received 48 requests for information on being a foster parent. Only seven eventually did.

Children on average stay about two years in foster care. Many, though, are in and out of care in days, weeks or months. Sometimes, Elitzer said she's happy to see her kids go back to their parents. Sometimes, she sits down and cries. She knows the child will be back in the system in a few months.

After 30 years, though, she's learned she can only do so much, she can't save every child. But that doesn't stop her from trying. "If you've got a place in your heart for kids," she asks, "how could you not?"

Courtesy: Messenger-Inquirer

KY READY TO “TAKE THE NEXT STEP” FOR DRUG ENDANGERED CHILDREN

Just shy of one year ago, representatives of various state agencies, government cabinets, colleges, universities and media gathered at the James F. Hardyman building on the University of Kentucky campus to announce the formation of the Kentucky Alliance for Drug Endangered Children (KADEC). The National Alliance for Drug Endangered Children (NADEC) also unveiled a training session schedule for Kentucky.

Some 1,400 social workers, nurses, members of the Maternal and Child Health HANDS program, law enforcement, home health educators, extension professionals and teachers attended the training. The sessions sparked the desire for those in attendance to begin developing local teams to advocate and educate for the protection of children endangered by drug production or sale within their homes.

The momentum is continuing. The 2nd National Conference for Drug Endangered Children was held October 3-5 in Washington, D.C. and was attended by 22 Kentucky professionals representing various regions of the Commonwealth. The conference focused on “taking the next step” with state and local programs designed to protect and prevent later substance abuse among children identified as endangered by homes where drugs are sold, used and manufactured.

Sessions included suggested methods for tracking the medical care and follow-up of children, treatment for parents of children, mental health needs of the drug endangered child and their families and the role of Drug Courts.

An effective, multidisciplinary team of social workers, teachers, school counselors, physicians, nurses, mental health professionals, law enforcement officers, prosecutors, judges, community educators and community support persons can literally change the path of children who live in homes where danger and crime are the norm. 30 Kentucky teams currently are in the initial stages of forming a Drug Endangered Child team in their region or community. These teams hold the mission of rescuing, defending, sheltering and protecting children whose safety, because of substance abuse, is threatened.

Information provided by the NADEC shows more clearly the connection between child abuse and neglect and the devastating effects this maltreatment can have for a lifetime.

The KADEC is a partnership of the University of Kentucky together with the Office of Drug Control Policy, Cabinet for Health and Family Services Department for Community Based Services and Maternal and Child Health, Pennyriple Narcotics Task Force, Kentucky National Guard, Prevent Child Abuse Kentucky, Louisville Metro Police Department and Kentucky State Police.

This group of dedicated individuals serves to identify children who are most in need of such support so they have the opportunities that are not defined solely by an experience of early childhood endangerment. These individuals and agencies are currently involved in child protection, community education, healthcare, public school systems, law enforcement, criminal investigation, emergency medical response teams, prevention, public health and state government.

The mission of KADEC is to provide educational support and an opportunity for professionals throughout the state to network and share creative ways to share and combine resources to protect and treat children.

Trainers with the KADEC are:

- Cheyenne Albro
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- Stephanie Fields, RN
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- Holly Hopper, MRC
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- Betty Spivack, MD
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For more information on the Kentucky Alliance for Drug Endangered Children please visit: www.ca.uky.edu/heel/dec.htm

ODCP WELCOMES NEW EMPLOYEE



Michael Pelonero joined the staff of the Office of Drug Control Policy as an Internal Policy Analyst after 22 years as a Special Agent with the U.S. Department of Justice, Drug Enforcement Administration. His last assignment prior to retiring from DEA was as the Resident Agent in Charge of the DEA London, Kentucky Resident Office. Michael brings over 30 years of law enforcement experience to ODCP and will work in the Compliance Branch where he will oversee the state funded Drug Task Forces.

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